

1/24

2

CREATE FULL RESERVATION		EXPRESS RESERVATION
PENDING RESERVATIONS	8848	SEARCH
WORKING RENTALS	8868	REPORTS
CLOSED RENTALS	8859	SETTINGS
INCOMING MESSAGES	8813	ABOUT RENTAL PROVIDER
INVOICES	8888	EXIT

4  
FIG. 1  
PRIOR ART

8

DELIVERY PHONE NUMBER	<input type="text"/>	THE DELIVERY OFFICE WILL BE ROUTED BASED ON THE DELIVERY PHONE NUMBER. IF NO DELIVERY PHONE NUMBER IS AVAILABLE, YOU MUST HAVE EITHER THE HOME OR WORK NUMBER TO PROCESS THE RESERVATION.
HOME PHONE NUMBER	<input type="text"/>	
WORK PHONE NUMBER	<input type="text"/>	
<input type="button" value="CANCEL"/>		<input type="button" value="&lt;&lt; BACK"/>
		<input type="button" value="NEXT &gt;&gt;"/>

6

FIG. 2  
PRIOR ART

2/24

Reso #:	<input type="text"/>	Renter's Name:	<input type="text"/>	Office:	<input type="text"/>	Contract Status:	<input type="text"/>
Renter Information		Delivery Phone: <input type="text"/> First Name: <input type="text"/> Address: <input type="text"/> City: <input type="text"/> Date of Birth: <input type="text"/> Age: <input type="text"/> Employer: <input type="text"/> Local Stay: <input type="text"/>					
		Servicing Office: <input type="text"/> Last Name: <input type="text"/> Address 2: <input type="text"/> City: <input type="text"/> State: <input type="text"/> Zip: <input type="text"/> Home Phone Number: <input type="text"/> Work Phone Number: <input type="text"/> Local Stay Phone Number: <input type="text"/>					
		Requested Delivery Date and Time: <input type="text"/> <input type="text"/> Delivery Location: <input type="text"/>					
		Renter Is: <input checked="" type="radio"/> Insured <input type="radio"/> Insured Theft <input type="radio"/> Claimant <input type="text"/> Agent Name: <input type="text"/> Agent Company: <input type="text"/> Agent Location: <input type="text"/>					
		Policy #: <input type="text"/> Expiration Date: <input type="text"/> <input type="text"/>					
		Liability? <input type="checkbox"/> Collision Ins.? <input type="checkbox"/> Comp. Ins.? <input type="checkbox"/> Deductible: <input type="text"/> Deductible: <input type="text"/>					
		<input type="text"/> Main Menu <input type="text"/> Renter Information <input type="text"/>					

10

**FIG.3**  
PRIOR ART

Search for a Rental																																																							
16	14	20	18	24	22	28																																																	
<input checked="" type="radio"/> Reso Number:	<input checked="" type="radio"/> First Name:	<input checked="" type="radio"/> Date Out:	<input checked="" type="radio"/> Contract Number:	<input checked="" type="radio"/> Claim Number:	<input checked="" type="radio"/> Status:	<input type="radio"/> Renter's Last Name:																																																	
<input type="radio"/> Bill To:	<input type="radio"/> Last Name:	<input type="radio"/> Date In:	<input type="radio"/> Office Number:																																																				
<table border="1"> <thead> <tr> <th>Reso Number</th> <th>First Name</th> <th>Last Name</th> <th>Bill To</th> <th>Claim Number</th> <th>Office</th> <th>Type</th> </tr> </thead> <tbody> <tr> <td>R5001-00000001</td> <td>James</td> <td>Morris</td> <td>Nancy Spencer</td> <td>P1088381</td> <td>380-Flint</td> <td>Contract</td> </tr> <tr> <td>R5001-00000002</td> <td>Kevin</td> <td>O'Neil</td> <td>Deonna Maiden</td> <td>P1088352</td> <td>23-Dayton</td> <td>Invoiced</td> </tr> <tr> <td>R5001-00000005</td> <td>Bill</td> <td>Haupricht</td> <td>Tonya Schmitt</td> <td>P1088410</td> <td>378-Troy</td> <td>7/22/98</td> </tr> <tr> <td>R5001-00000007</td> <td>Herbert &amp; Dorith</td> <td>Rodenbach</td> <td>Flora Bridges</td> <td>P1111770</td> <td>372-Ft.Wayne</td> <td><input type="radio"/> &lt;Pending&gt;</td> </tr> <tr> <td>R5001-00000023</td> <td>Zelma</td> <td>Waymond</td> <td>Zelma Waymon</td> <td>P1086873</td> <td>59-Columbus II C</td> <td>7/27/98</td> </tr> <tr> <td>R5001-00000028</td> <td>Vikas</td> <td>Bhuiada</td> <td>Vikas Bhuiada</td> <td>P1111350</td> <td>374-Southfield</td> <td>7/24/98</td> </tr> </tbody> </table>							Reso Number	First Name	Last Name	Bill To	Claim Number	Office	Type	R5001-00000001	James	Morris	Nancy Spencer	P1088381	380-Flint	Contract	R5001-00000002	Kevin	O'Neil	Deonna Maiden	P1088352	23-Dayton	Invoiced	R5001-00000005	Bill	Haupricht	Tonya Schmitt	P1088410	378-Troy	7/22/98	R5001-00000007	Herbert & Dorith	Rodenbach	Flora Bridges	P1111770	372-Ft.Wayne	<input type="radio"/> <Pending>	R5001-00000023	Zelma	Waymond	Zelma Waymon	P1086873	59-Columbus II C	7/27/98	R5001-00000028	Vikas	Bhuiada	Vikas Bhuiada	P1111350	374-Southfield	7/24/98
Reso Number	First Name	Last Name	Bill To	Claim Number	Office	Type																																																	
R5001-00000001	James	Morris	Nancy Spencer	P1088381	380-Flint	Contract																																																	
R5001-00000002	Kevin	O'Neil	Deonna Maiden	P1088352	23-Dayton	Invoiced																																																	
R5001-00000005	Bill	Haupricht	Tonya Schmitt	P1088410	378-Troy	7/22/98																																																	
R5001-00000007	Herbert & Dorith	Rodenbach	Flora Bridges	P1111770	372-Ft.Wayne	<input type="radio"/> <Pending>																																																	
R5001-00000023	Zelma	Waymond	Zelma Waymon	P1086873	59-Columbus II C	7/27/98																																																	
R5001-00000028	Vikas	Bhuiada	Vikas Bhuiada	P1111350	374-Southfield	7/24/98																																																	

3/24

12

34

**FIG. 4**  
PRIOR ART

L

4/24

## Working Rentals

28

## Print Grid

Reso Number    First Name    Date Out    Contract Number    Claim Number  
 Bill To        Last Name        Contract Status    Office Number

Reso Number	First Name	Last Name	Bill To	Claim Number	Office	Type	Contract	Status	Date Out	
R5001-00000002	Kevin	O'Neil	Deonna Madden	P1088352	23-Dayton	-	-	14169432	Active	7/23/98

RR5001-00000028 Vikas Bhutada Vikas Bhutada P1111350 374-Southfield |SP 11779777 Active 7/24/98

R55001-00000078 Susan Rohrs-Poling Mike O'Rourke P1087848 74-Holland C 13884197 Active 7/8/98

R5001-00000107 David & Connie Cobb Mary Frances Shephard P1088243 384-Grand Rapids | 11818460 <Terminated> 7/27/98

FIG. 5  
PRIOR ART

36

## Incoming Messages

[Print Grid](#)

Renter's Last Name:

Reso Number  
  First Name  
  Date Out  
  Contract Number  
  Claim Number  
 Bill To  
  Last Name  
  Date In  
  Contract Status  
  Office Number

Reso Number	First Name	Last Name	Bill To	Claim Number	Office	Type	Contract	Status	Date Out	Date In	Req Days
R5001-00000051	Bernice	Harris	Shenequa Dawson	P111382	374-Southfield	I	11779579	Invoiced	07/14/98	8/5/98	7

R5001-00000052	Anita & Michael	Barratt	Ray Haman	P0187278	374-Southfield	I	1778764	Active	7/7/98		3
----------------	-----------------	---------	-----------	----------	----------------	---	---------	--------	--------	--	---

R5001-00000053	Valdez	Rayford	Ray Haman	P1059733	374-Southfield	T	11783654	Active	06/30/98		10
----------------	--------	---------	-----------	----------	----------------	---	----------	--------	----------	--	----

R5001-00000056	Heather	Hardin	Nancy Spencer	P1058354	375-Warren 2	I	11791605	Invoiced	5/29/98	8/1/98	1
----------------	---------	--------	---------------	----------	--------------	---	----------	----------	---------	--------	---

40

This rental needs to be extended 7 days for the following reason: Per Gordan, car is still being worked on, check back 8/4.

42	<input type="checkbox"/> ACKNOWLEDGE	44	<input type="checkbox"/> PRINT RESO MESSAGES
----	--------------------------------------	----	--

38

**FIG. 6**  
PRIOR ART

5/24

## Closed Rentals

28

[Print Grid](#)

Renter's Last Name:

Reso Number  
  First Name  
  Date Out  
  Contract Number  
  Claim Number  
 Bill To  
  Last Name  
  Date In  
  Contract Status  
  Office Number

Reso Number	First Name	Last Name	Bill To	Claim Number	Office	Type	Contract	Status	Date Out	Date In
R5001-00000001	James	Morris	Nancy Spencer	P1088381	380-Flint		11896987	Invoiced	7/22/98	8/4/98

R5001-00000023	Zelma	Waymond	Zelma Waymond	P1086873	59-Columbus II	C	14233782	Invoiced	7/27/98	7/27/98
----------------	-------	---------	---------------	----------	----------------	---	----------	----------	---------	---------

R5001-00000039	Douglas	Ballantyne	Karen Nelson	46-35990	13 Columbus	C	13940537	Invoiced	7/14/98	7/29/98
----------------	---------	------------	--------------	----------	-------------	---	----------	----------	---------	---------

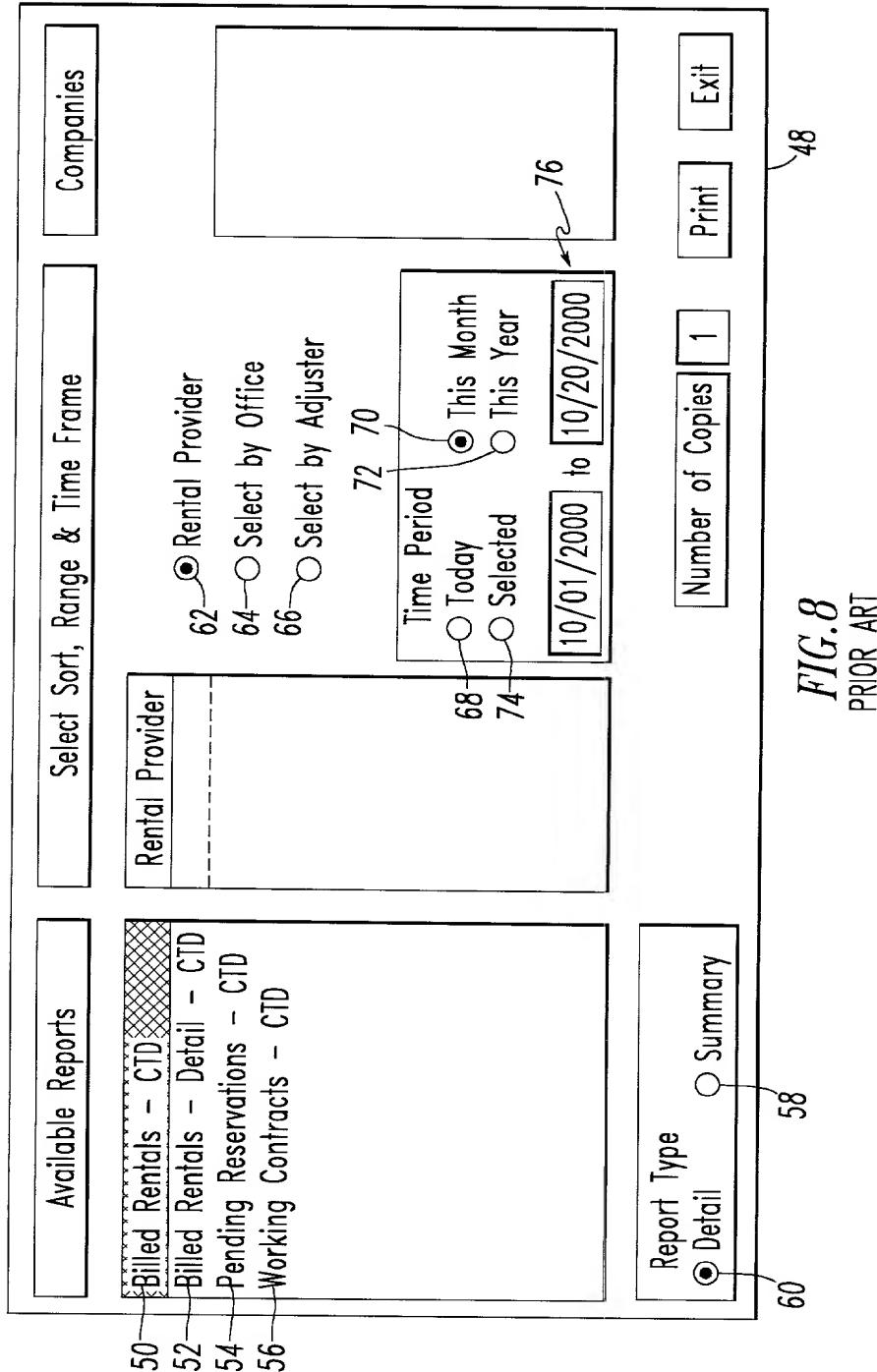
R5001-00000060	Maria	Modellin	Shenequa Dawson	P1087534	376-Taylor		11845604	Invoiced	7/13/98	7/29/98
REPRINT INVOICE										

46

6/24

*FIG. 7*  
PRIOR ART

7/24

FIG. 8  
PROR ART

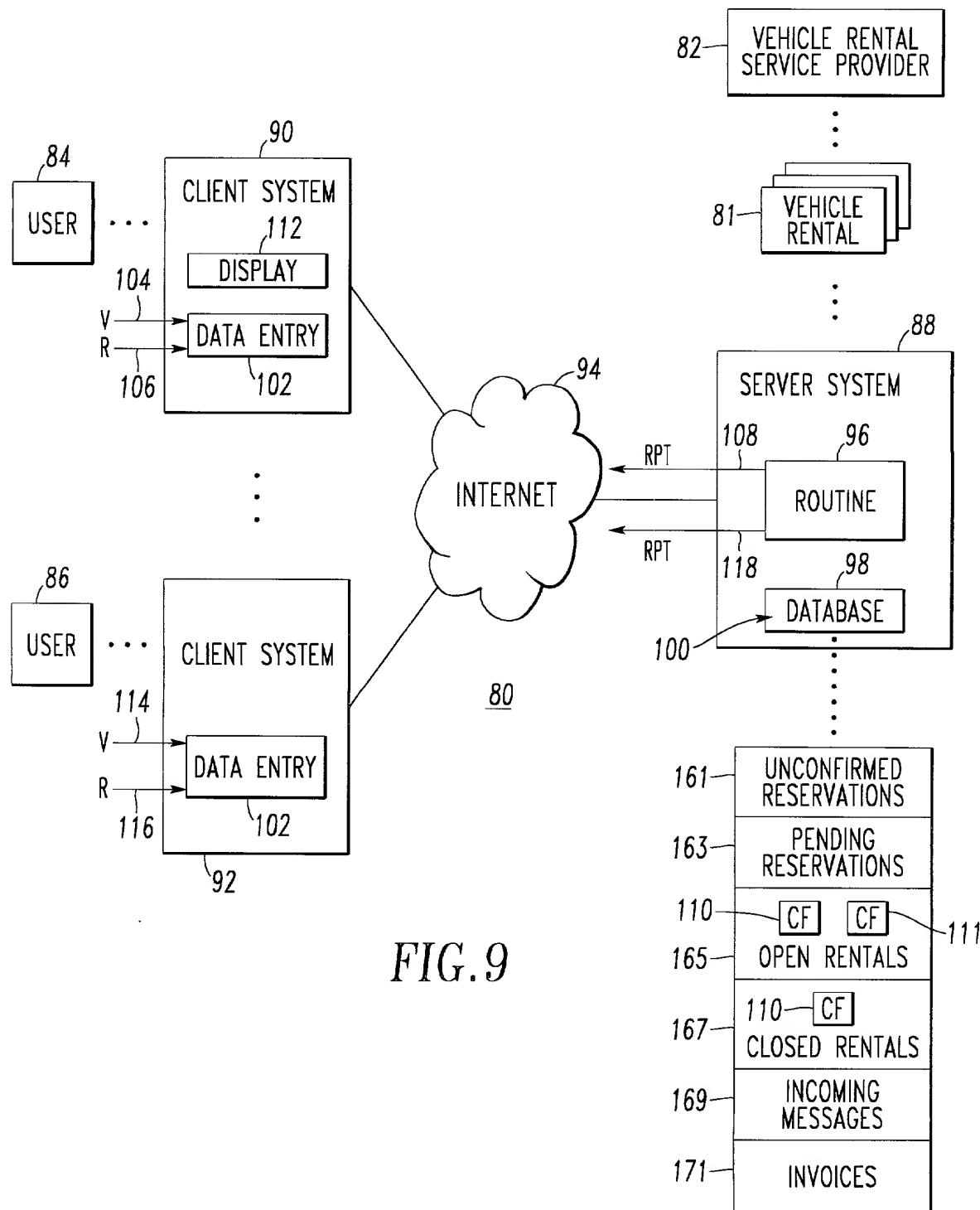


FIG. 9

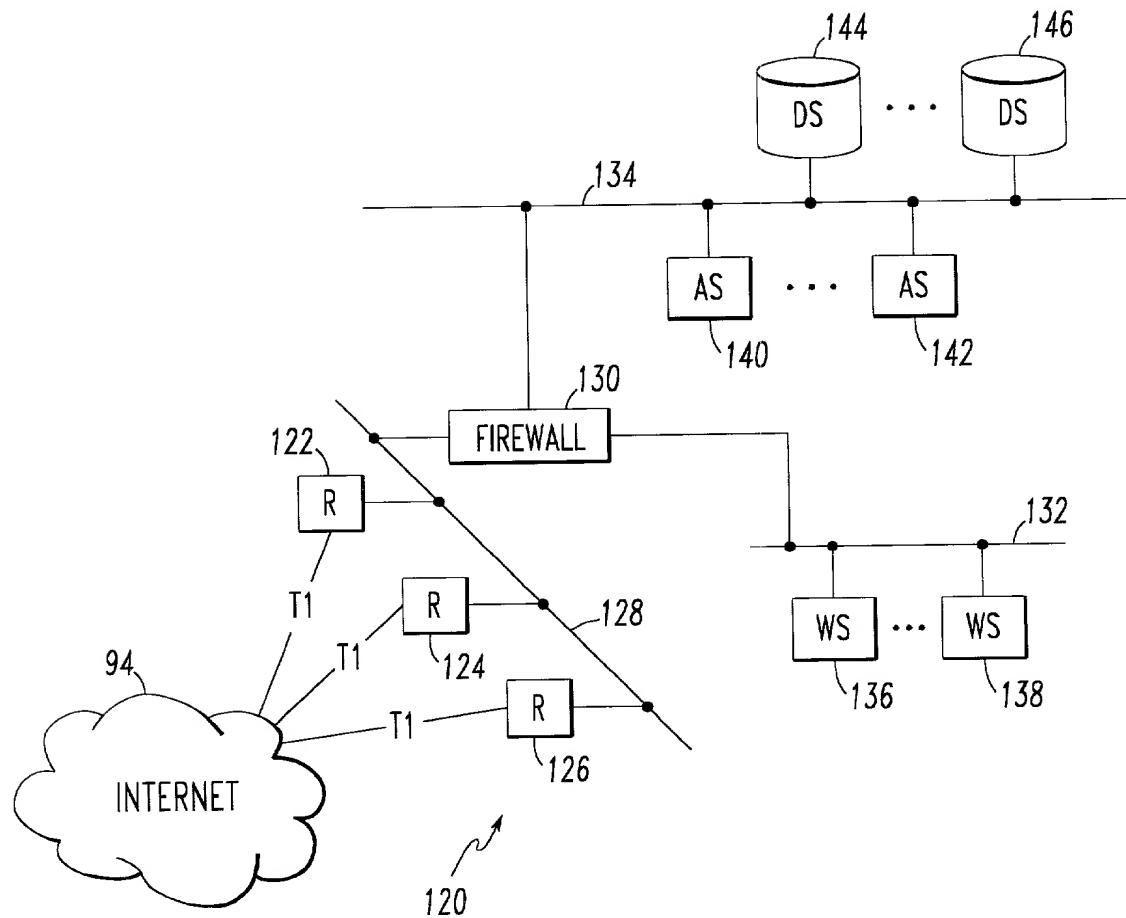


FIG.10

10/24

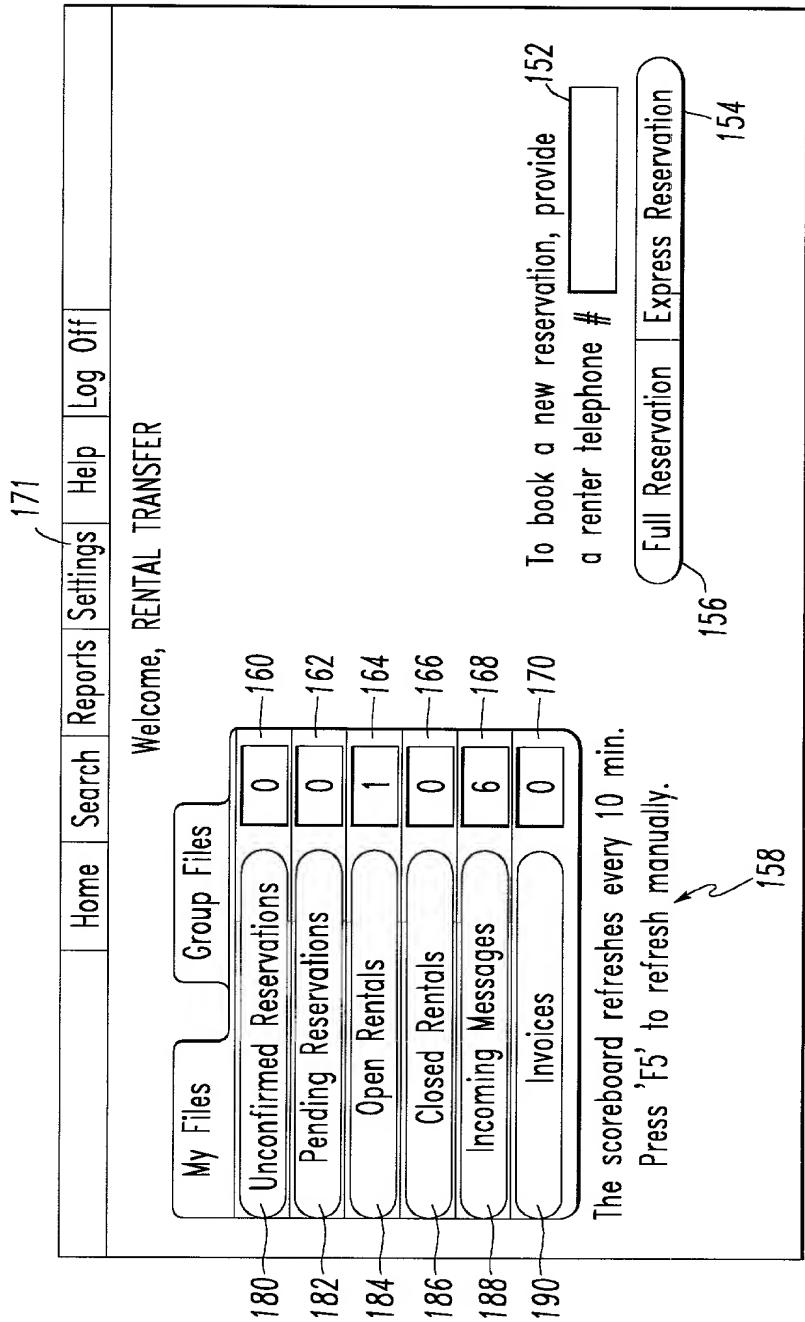


FIG. 11

11/24

Express Reservation		Renter Information	
Renter Contract #	440-715-3574 *	Rental Reason	<input checked="" type="checkbox"/> Accident ▶
Service Office	Bedford Heights *	Renter Type	<input type="radio"/> Claimant <input type="radio"/> Insured *
Service Office Phone #	216-765-1120 *	Required Immediately ?	<input type="radio"/> No <input checked="" type="radio"/> Yes *
Renter First Name	*	Delivery Date	<input type="text"/> (MM/DD/YYYY)
Renter Last Name	*	(Rental branch will contact renter to arrange delivery time)	
Billing Information			
Renter Self Pay	<input checked="" type="radio"/> No <input type="radio"/> Yes	Date of Loss	<input type="text"/> (MM/DD/YYYY)
Bill to Name	*	Daily Maximum	<input type="text"/> *
Bill to Company	*	Policy Maximum	<input type="text"/> *
Claim Number	*	Authorized Days	<input type="text"/> *
Ins. Co. Reference #	*	Percent Authorized	<input type="text"/> 100.0 *
Insured Name	*	Pay for PWD	<input type="radio"/> No <input checked="" type="radio"/> Yes
Repair Facility			
Repair Facility	<input type="text"/>	Location	<input type="text"/>
Vehicle Class	<input type="text"/>	Phone	<input type="text"/>
Vehicle Class	<input type="text"/>	Notes	<input type="text"/>
Authorized Rate	<input type="text"/> *	-172	
Driveable Status	<input type="text"/> Choose from list ▶		
<input type="button"/> Cancel <input type="button"/> Next		* Indicates a Required Field	

FIG.12

12/24

173

Renter Info		Billing Info		Agent Info	
Renter Information					
Renter Contract #	<b>440-715-3574 *</b>		Home Phone	<input type="text"/> *	
Same as Home	<input type="checkbox"/>	Same as Local Stay	<input type="checkbox"/>	Work Phone	<input type="text"/> *
Same as Work	<input type="checkbox"/>	Local Stay Address	<input type="text"/>	Local Stay Phone	<input type="text"/>
Service Office	<b>Bedford Heights</b>	Delivery Address same as Home Address?	<input type="checkbox"/> Yes	Delivery Address	<input type="text"/>
Service Office Phone #	<b>216-765-1120</b>	First Name	<input type="text"/> *	Rental Reason	<input type="text"/> Select Reason ▼
First Name	<input type="text"/> *	Last Name	<input type="text"/> *	Renter Type	<input type="radio"/> Claimant <input type="radio"/> Insured *
Last Name	<input type="text"/> *	Address	<input type="text"/>	Renter Date of Birth	<input type="text"/> (MM/DD/YYYY)
Address	<input type="text"/>	City	<input type="text"/>	Renter's Employer	<input type="text"/>
City	<input type="text"/>	State	<input type="text"/>	Required Immediately?	<input type="radio"/> No <input type="radio"/> Yes *
State	<input type="text"/>	Zip Code	<input type="text"/>	Delivery Date	<input type="text"/> (MM/DD/YYYY)
			<input type="button" value="Cancel"/> <input type="button" value="Next"/> * Indicates a Required Field		

FIG. 13A

13/24

Renter Info		Billing Info		Agent Info	
Billing Information					
Renter Self Pay	<input checked="" type="radio"/> Yes <input type="radio"/> No	Ins. Co. Reference #	<input type="text"/>		
Bill to Name	<input type="text"/> *				
Bill to Company	<input type="text"/> *				
Bill to Address	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> *				
Bill to Phone	<input type="text"/>				
Claim Number	<input type="text"/> *				
	Insured Name	<input type="text"/> John Zernick			
	Date of Loss	<input type="text"/> (MM/DD/YYYY)*			
	Daily Maximum	<input type="text"/> *			
	Policy Maximum	<input type="text"/> *			
	Authorized Days	<input type="text"/> *			
	Percent Authorized	<input type="text"/> 100.0 *			
	Pay for PWD	<input checked="" type="radio"/> No <input type="radio"/> Yes			
	Pays Fuel	<input checked="" type="radio"/> No <input type="radio"/> Yes			
	Pay Tax	<input checked="" type="radio"/> No <input type="radio"/> Yes			
Vehicle Class Information					
Vehicle Class	<input type="text"/> Choose...(Insured)(Claimant) Rate ▼				
Authorized Rate	<input type="text"/> * 176				
Derivable Status	<input type="text"/> Choose from List ▼ 177				
Repair Facility Information					
Repair Facility	<input type="text"/>				
Repair Facility Location	<input type="text"/>				
Repair Facility Phone	<input type="text"/> 178B <input type="text"/> 178A				
Customer Vehicle Information					
Vehicle Year	<input type="text"/>				
Vehicle Make	<input type="text"/>				
Vehicle Model	<input type="text"/>				
Notes	<input type="text"/>				
Back	<input type="button" value="Cancel"/>	<input type="button" value="Finish"/>	<input type="button" value="Next"/>	* Indicates a Required Field	

FIG. 13B

14/24

Renter Info	Billing Info	Agent Info
Agent & Policy Information		
Agent Name		Policy Number
Agent Location		Expiration Date
Agent Company		Liability <input type="checkbox"/>
Agent Phone		Collision Ins. <input type="checkbox"/>
		Deductible <input type="checkbox"/> 0.0
		Comp. Ins. <input type="checkbox"/>
		Deductible <input type="checkbox"/> 0.0
<input type="button" value="Back"/> <input type="button" value="Cancel"/> <input type="button" value="Finish"/> * Indicates a Required Field		

FIG. 13C

175

Open Rentals		202		204		210		214		216		218		220		232		222	
200	Adjuster's Last, First Name	206	Renter's Last, First Name	208	Repair Veh	212	# of Days Out	214	Days Left	216	Total Charges	218	Days Left	220	Extend	232	Change Rate	222	
Claim#		C/I	Body Shop	Yr/Model	Car Out	Out	Date		Date				Date		Extend	Rate	Rate	Messages	
1212122	Doe, John	Lynch Jennifer	1	NA	NA	NA	11/01/2000	3	1	8	\$69.00								
1231231234	Doe, John	Park Andrew	1	NA	NA	NA	09/13/2000	52	7	-2	\$468.00								
NA	Doe, John	Kim Jennifer	1	Atlas Transmission	Toyota Camry	10/24/2000	11	0	-1	\$165.00									
NA	Doe, John	Zernick John	1	Atlas Transmission	NA	11/02/2000	2	1	5	\$59.98									

FIG. 14A

This list refreshes automatically every 10 minutes. Press 'F5' to refresh manually.

15/24

FIG. 14C

Extend Rental	
Andrew Park	
Extension Days : -236	
Approved By : -238 Jane Doe	
Extend Rental -240	
234	
Max Rental	
Andrew Park	
Max Date (MM/DD/YYYY) : -242	
Approved By : -244 Jane Doe	
Max Rental -246	

Change Authorized Rate	224
Andrew Park	
Current Authorized Rate : 9.0 -226	
Vehicle Class : Full Size -227	
Date (MM/DD/YYYY) :	
New Rate : -228	
Approved By : -230 Jane Doe	
Vehicle Class: -231	
<input checked="" type="radio"/> Choose... (Insured) (Claimant) Rate <input type="radio"/> EC NA NA Economy <input type="radio"/> CC 19.99 19.99 Compact <input type="radio"/> LC 21.99 21.99 Midsize <input type="radio"/> SC 23.99 23.99 Standard <input type="radio"/> FC 25.99 25.99 Full Size <input type="radio"/> PC 29.99 29.99 Premium <input type="radio"/> XV 31.99 31.99 Minivans <input type="radio"/> MV NA NA Full Size Vans <input type="radio"/> XP 32.99 32.99 Pick-ups <input type="radio"/> PT NA NA Full Size Trucks <input type="radio"/> LC NA NA Luxury <input type="radio"/> SU 33.99 33.99 Sport Utility <input type="radio"/> XX NA NA Exotic <input type="radio"/> TU NA NA Tow Units	
Rate -232	

FIG. 14B

16/24

Pending Reservations		272	274	276	278	280	282	284	250
Insurance Claim #	Adjuster's Last, First Name	Renter's Last, First Name	Insurance Reference #	Rental Provider's Rental #	Date Entered in System	Days in System	Number of Anticipated Delivery Date	Messages	258
12345	Doe, Jane	Mills, Stephanie	NA	1350586	11/17/2000	20	11/17/2000	Message	264
123489	Doe, Jane	Mills, Stephanie	NA	1350606	11/29/2000	8	11/29/2000	Message	266
12345678	Doe, Jane	Hubbard, Don	NA	1350610	11/29/2000	8	11/29/2000	Message	268

FIG. 15A

Res#: 1350587 Renter: Jennifer Barber Office: 11-Bedford Heights Company: American Family

12/06/2000 19:30:04 Office: Corporate RCC User: DEMO  
 Customer needs car by 10 am. Please call.

FIG. 15B

Approved By: Days: Authorized Rate: Daily Max: Policy Max: 290  
 286

292 →

FIG. 15C

<input type="button" value="Cancel Reservation"/>	<u>296</u>
1350606, Stephanie Mills	
Cancellation Reason :	
298 →	
<input type="button" value="Cancel Reservation"/>	<input type="button" value="Don't Cancel Res."/> 300

FIG. 15D

<input type="button" value="Cancel Reservation"/>	<u>302</u>
1350606, Stephanie Mills	
Cancellation Reason :	
303 → Cancellation Reason : Customer does not need the car.	
304 → <input type="button" value="Finish"/>	

17 / 24

FIG. 16

<input type="button" value="Search"/>	<u>306</u>
Search Term	<input type="radio"/> Choose an option... <input type="radio"/> Rental Provider's Reso Number <input type="radio"/> Renter's First Name <input type="radio"/> Renter's Last Name <input type="radio"/> Bill To (Adjuster's Name) <input type="radio"/> Adjuster's Name <input type="radio"/> Choose an adjuster... <input type="radio"/> Doe, Jane <input type="radio"/> EMO, D <input type="radio"/> EMO, D  <input type="radio"/> 324  <input type="radio"/> 310 <input type="radio"/> 312 <input type="radio"/> 314 <input type="radio"/> 316 <input type="radio"/> 318 <input type="radio"/> 320 <input type="radio"/> 322  <input type="radio"/> 317 <input type="radio"/> 319  <input type="radio"/> 311 <input type="radio"/> 313 <input type="radio"/> 315 <input type="radio"/> 317 <input type="radio"/> 319  <input type="radio"/> 321 <input type="radio"/> 323  <input type="radio"/> 325 <input type="radio"/> 327  <input type="radio"/> 326  <input type="radio"/> 328  <input type="radio"/> 329  <input type="radio"/> 330  <input type="radio"/> 331  <input type="radio"/> 333 <input type="radio"/> 335 <input type="radio"/> 337 <input type="radio"/> 339  <input type="radio"/> 332 <input type="radio"/> 334 <input type="radio"/> 336 <input type="radio"/> 338  <input type="radio"/> 335 <input type="radio"/> 337 <input type="radio"/> 339  <input type="radio"/> 340 <input type="radio"/> 342  <input type="radio"/> 344 <input type="radio"/> 346  <input type="button" value="Search"/> <input type="button" value="Reset"/>  For Open and Closed Rentals: Start Date (MM/DD/YYYY) → 340      End Date (MM/DD/YYYY) → 342 344 346

18/24

252

Home Search Reports Settings Help Log Off

Rental Status And Search Term

Rental Status  Search Term

352 354 356  
358 360

Unconfirmed  
Pending  
Open  
Billed

Rental Criteria  Generate Report

FIG.17A

352 354 362 372

Rental Status

356 358 360

Search Term

FIG.17B

375

Search Term Detail

376 378 380

FIG.17C

374

FIG. 17D

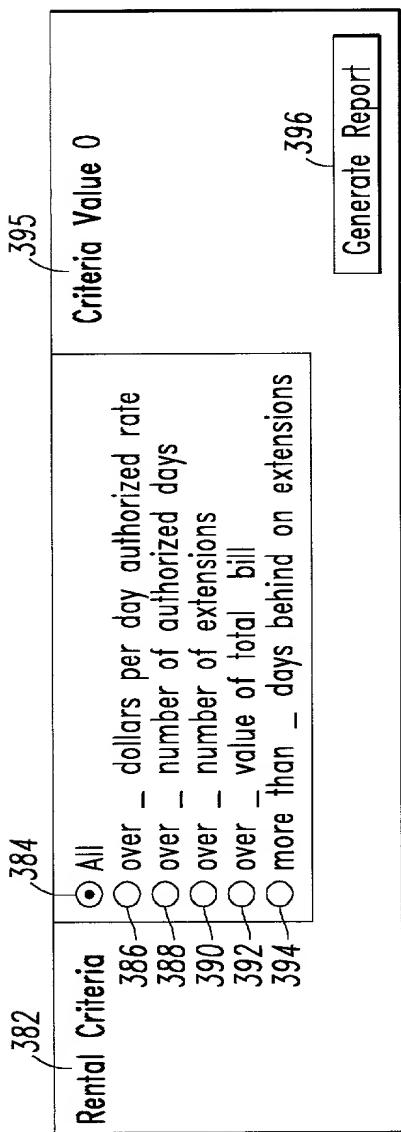
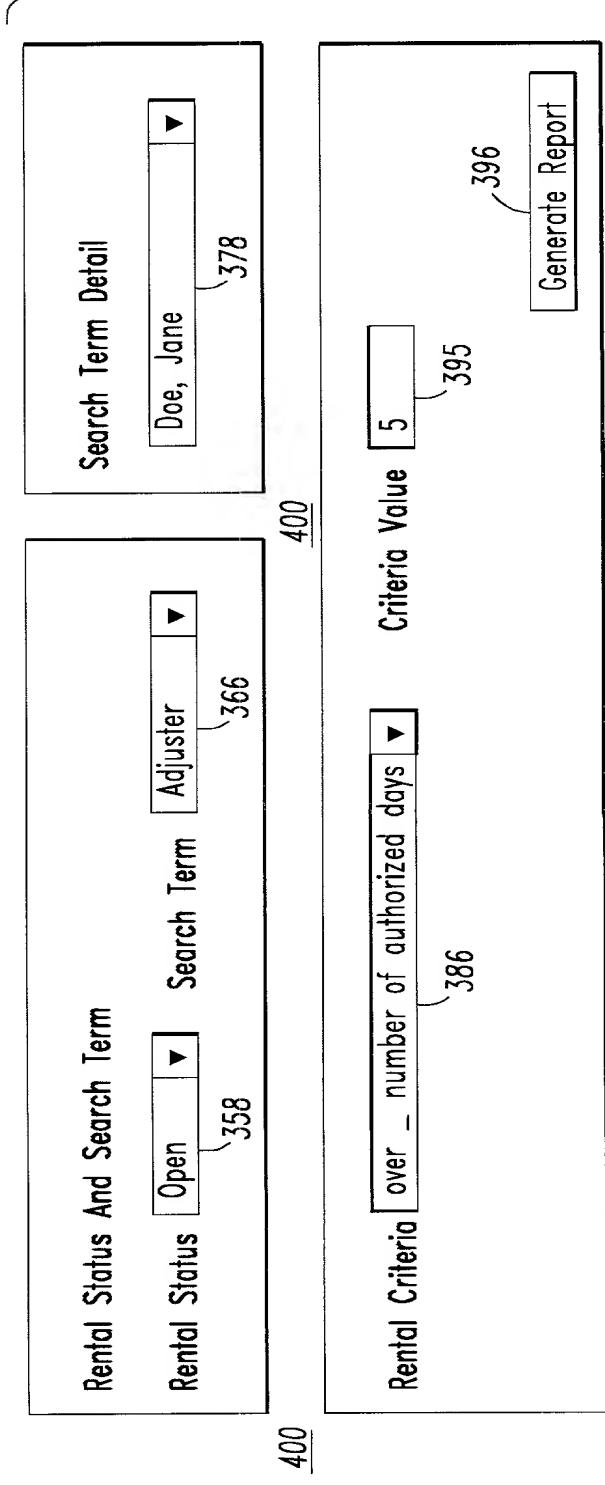


FIG. 17E



20/24

		Open Rentals				With Authorized Days Over 5 Days				For Adjuster : Doe, Jane			
Last, First Name	C/I	Office No.	Body Shop	Repair Veh Yr/Model	Car Out	Car Out	Days Out	Days Left	Days # of ext.	Car Out	Days Out	Days Left	to date
406	408	410	412	414	416	418	420	422	422	422	422	422	422
402													
Adjuster: Jane Doe													
Kim, Jennifer		11	Atlas Transmission	Toyota, Camry	10/24/2000	26	-1	2					
Zernick, John		623	Atlas Transmission	NA	11/02/2000	17	-10	1					
Hartman, Darrell		11	NA	NA	11/08/2000	11	-6	0					
404													
Mills, Stephanie		11	NA	NA	11/08/2000	11	-6	0					
Gill, Kevin		11	NA	NA	11/08/2000	11	-3	1					
Hubbard, Don		11	NA	NA	11/08/2000	11	-6	1					

FIG. 17F

## Management Reports

442

Report Type  Summary (includes only average amounts for all rentals)444  Detail (includes all rentals)

446

Renter Type

All

Insured

Claimant

Date Range From: \* To \*  
438 440

396

Generate Report

FIG. 17G

424

430

Renter Type

All

Insured

Claimant

396

Generate Report

Management Reports

Report Type  Summary (includes only average amounts for all rentals)

Detail (includes all rentals)

Renter Type

All

Insured

Claimant

Date Range From: \* To \*  
438 440

396

Generate Report

FIG. 17F

21/24

Management Reports - Summary						
For Adjuster : EMO, D						
Where Billing Occured Between 06/30/2000 and 12/31/2000						
Adjuster	Rental Count	Rental Length	Authorized Days	Rental Rate	Auth Rate	Total Bill
					# Times of Extensions	460
446	448	450	452	454	456	458
D EMO	2	13.0	6.0	NA	\$31.49	0.0
						\$323.67

FIG. 17H

FIG. 171

428

## Management Reports – Detail

FIG.18A

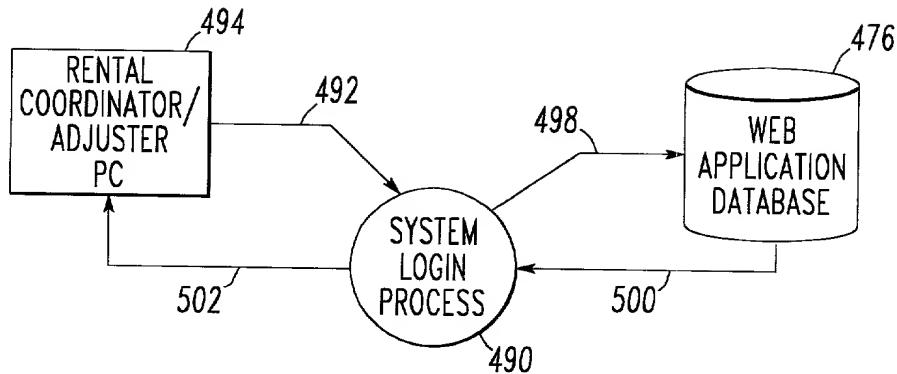


FIG.18B

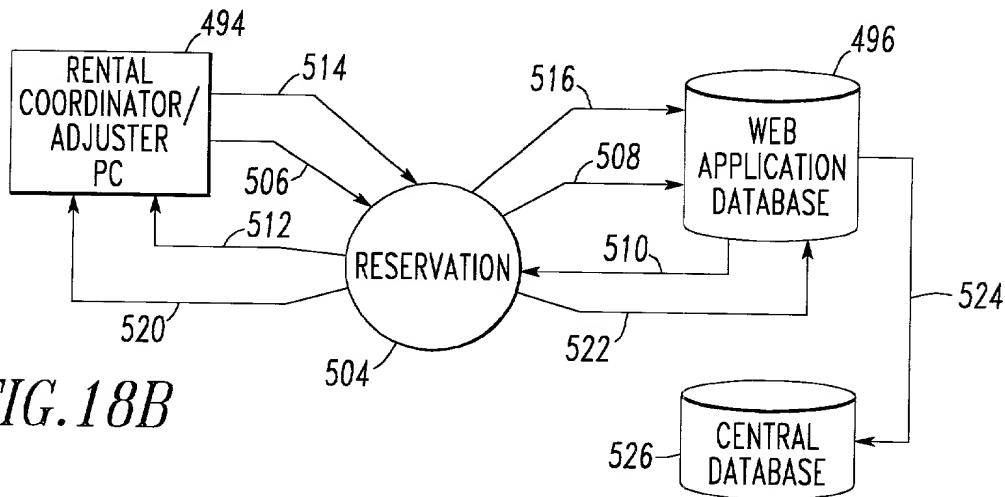
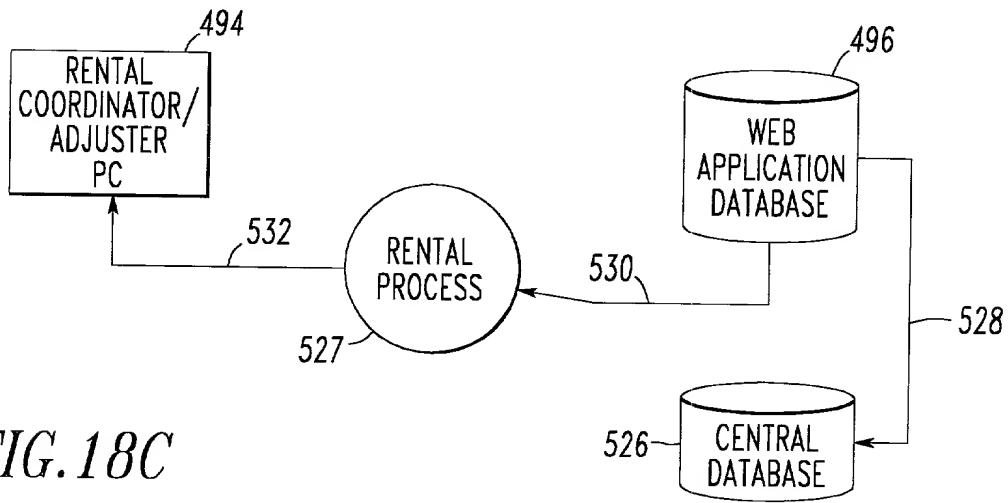


FIG.18C



23/24

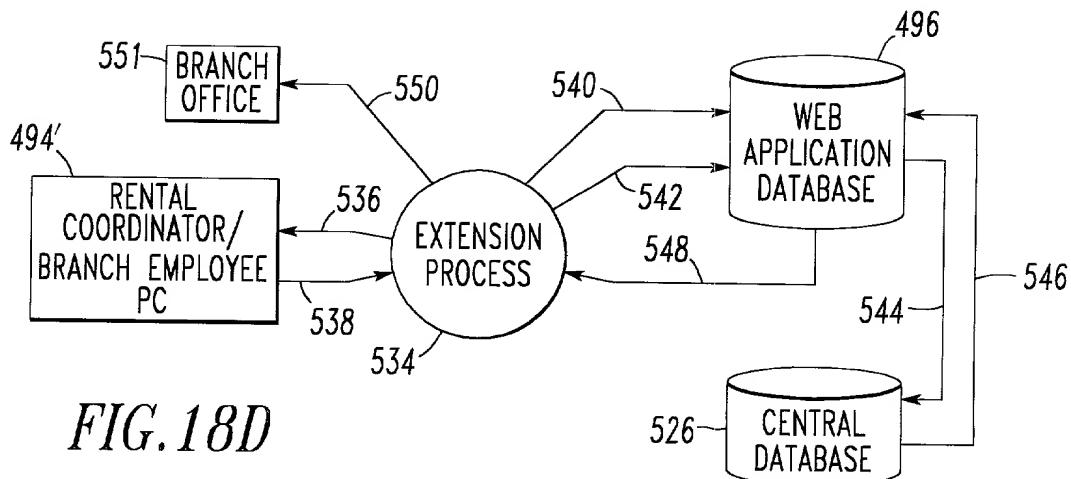


FIG. 18D

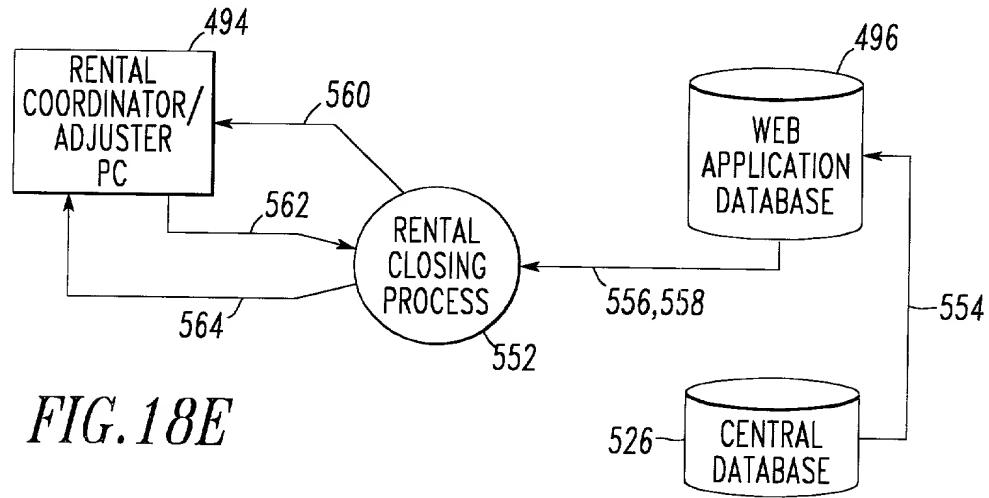


FIG. 18E

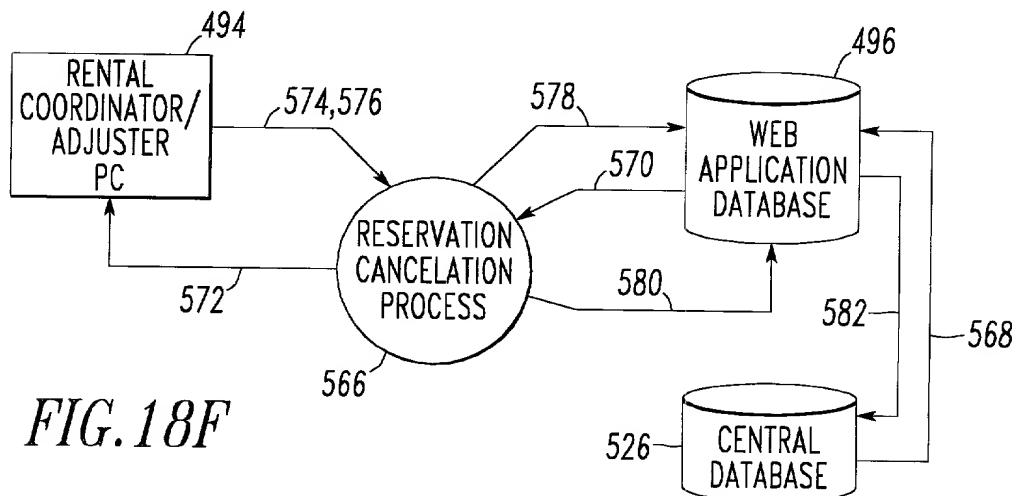


FIG. 18F

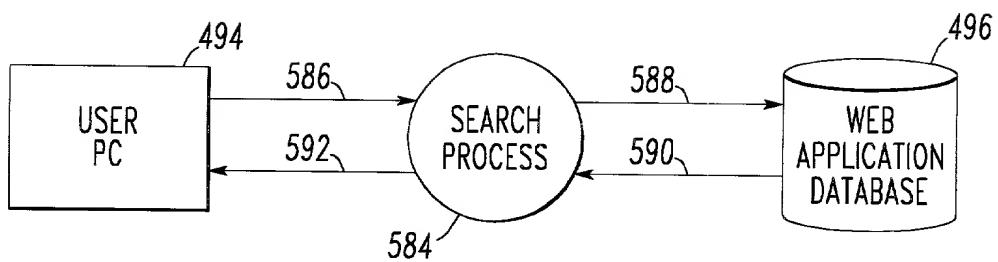


FIG.18G

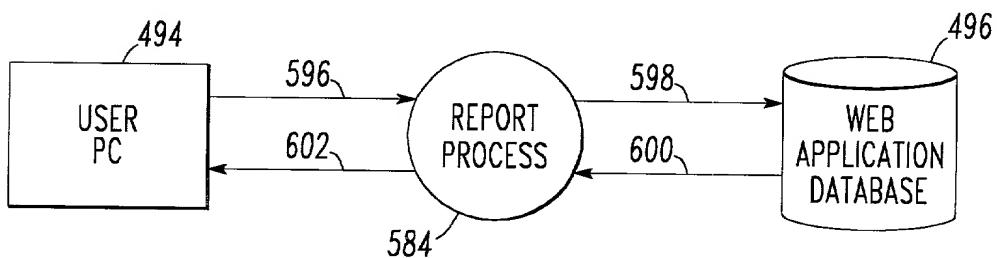


FIG.18H